

December 8, 2017

Alexandra Dunn
EPA Regional Administrator
USEPA Region 1 Headquarters
5 Post Office Square - Suite 100
Boston, MA 02109-3912

Dear Ms. Dunn:

Congratulations on your appointment as Region 1 Administrator for EPA. New Hampshire citizens take pride in the natural environment and in natural resources, yet there are increasing and very serious threats to public health and environmental protection in the Granite State. As you begin your tenure overseeing federal environmental protection in New England, we respectfully submit our expectations for you and for your regional leadership.

Carbon Pollution and Global Warming

December 31, 2017 marks the 47th anniversary of the Clean Air Act. We support the Clean Power Plan and object to its repeal, called for by EPA Administrator Scott Pruitt. A majority of New Hampshire citizens believe that global warming is caused mostly by human activities, and by a margin of more than 2 to 1 New Hampshire citizens support setting strict carbon dioxide pollution limits on existing coal fired plants. NH is at the end of the nation's tailpipe and receives pollution from upwind coal plants. The US Supreme Court has affirmed that CO2 falls within the Clean Air Act and the EPA did find cause for endangerment to public health from carbon pollution. We ask that you publicly support strict reductions in CO2 emissions from power plants.

Toxics in our Drinking Water

Under the leadership of Senator Shaheen our congressional delegation found it necessary to fund through the Defense Authorization Act a national study on the health effects of people exposed to PFCs in drinking water. We are troubled EPA is not the first line of defense for clean water and it is apparent EPA has reversed course altogether with respect to environmental protection; we have little confidence that EPA leadership will adhere to "providing assistance to others in combating environmental pollution." We need your commitment that EPA's regulatory oversight on dangerous chemicals will increase and result in decreased risks to public health from the exposure to chemicals.

Science Censorship

We are very concerned that government scientists were prevented from speaking publicly at the State of the Narragansett Bay conference in Rhode Island in October. We need your assurance, from the beginning of your tenure as Region 1 Administrator for New England, that EPA scientists will not be silenced on the topic of climate change or other environment and public health matters and will not be prevented from attending and speaking at conferences, whether here in NH or elsewhere in the Region.

In closing we expect you will adhere to the original mission of the Environmental Protection Agency, and affirm to the New Hampshire congressional delegation and citizens that you will work to curb carbon pollution, enforce strict standards for toxic chemicals, and support the necessity of sound science within the context of public discourse. The EPA cannot protect our land, air, and water if it is led by officials who ignore the original mission of the EPA.

Sincerely,

Over 200 New Hampshire residents

Encl: NH welcome to the new Regional Administrator for EPA Region 1 (spreadsheet)

Timestamp

Name

Town of Residence

Email Address

Personal Email / Ex. 6

Personal Email / Ex. 6

Personal Email / Ex. 6

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Personal Email / Ex. 6

A full explanation of the sources of data and methodology is in **Methodology**.

Notes for all state data tables

1. **Total Population** is based on 2013 U.S. Census and represents the at-risk populations in counties with ozone or PM_{2.5} pollution monitors; it does not represent the entire state's sensitive populations.
2. Those **18 & under** and **65 & over** are vulnerable to ozone and PM_{2.5}. Do not use them as population denominators for disease estimates—that will lead to incorrect estimates.
3. **Pediatric asthma** estimates are for those under 18 years of age and represent the estimated number of people who had asthma in 2013 based on the state rates when available or national rates when not (Behavioral Risk Factor Surveillance System, or BRFSS), applied to county population estimates (U.S. Census).
4. **Adult asthma** estimates are for those 18 years and older and represent the estimated number of people who had asthma during 2013 based on state rates (BRFSS) applied to county population estimates (U.S. Census).
5. **COPD** estimates are for adults 18 and over who had ever been diagnosed with chronic obstructive pulmonary disease, which includes chronic bronchitis and emphysema, based on state rates (BRFSS) applied to county population estimates (U.S. Census).
6. **Cardiovascular disease** estimates are for adults 18 and over who have been diagnosed within their lifetime, based on state rates (BRFSS) applied to county population estimates (U.S. Census). CV disease includes coronary heart disease, stroke, and heart attack.
7. **Diabetes** estimates are for adults 18 and over who have been diagnosed within their lifetime based on state rates (BRFSS) applied to county population estimates (U.S. Census).
8. **Poverty** estimates include all ages and come from the U.S. Census Bureau's Small Area Income and Poverty Estimates program. The estimates are derived from a model using estimates of income or poverty from the Annual Social and Economic Supplement and the Current Population Survey, 2013.
9. Adding across rows does not produce valid estimates. Adding the at-risk categories (asthma, COPD, poverty, etc.) will double-count people who fall into more than one category.

Notes for all state grades tables.

1. Not all counties have monitors for either ozone or particle pollution. If a county does not have a monitor, that county's name is not on the list in these tables. The decision about monitors in the county is made by the state and the U.S. Environmental Protection Agency, not by the American Lung Association.
2. **INC** (Incomplete) indicates that monitoring is underway for that pollutant in that county, but that the data are incomplete for all three years. Those counties are not graded or received an incomplete. For particle pollution, some states collected data but experienced laboratory quality issues that meant the data could not be used for assessing pollution levels.
3. **DNC** (Data Not Collected) indicates that data on that particular pollutant is not collected in that county.
4. The **Weighted Average (Wgt. Avg)** was derived by adding the three years of individual level data (2011-2013), multiplying the sums of each level by the assigned standard weights (i.e. 1=orange, 1.5=red, 2.0=purple and 2.5=maroon) and calculating the average. Grades are assigned based on the weighted averages as follows: A=0.0, B=0.3-0.9, C=1.0-2.0, D=2.1-3.2, F=3.3+.
5. The **Design Value** is the calculated concentration of a pollutant based on the form of the National Ambient Air Quality Standard, and is used by EPA to determine whether the air quality in a county meets the standard. The numbers refer to micrograms per cubic meter, or $\mu\text{g}/\text{m}^3$. Design values for the annual PM_{2.5} concentrations by county for the period 2011-2013 are as posted on August 28, 2014 at EPA's website at <http://www.epa.gov/air/airtrends/values.html>. The 2011-2013 design values were compared to the 2012 National Ambient Air Quality Standard for Annual PM_{2.5}, particularly to the EPA's assessment of data quality required, as discussed on EPA's website at <http://www.epa.gov/pm/designations/2012standards/regs.htm>. Many design values are missing because state data did not meet quality requirements.
6. The annual average National Ambient Air Quality Standard for PM_{2.5} is 12 $\mu\text{g}/\text{m}^3$ as of December 14, 2012. Counties with design values of 12 or lower received a grade of "Pass." Counties with design values of 12.1 or higher received a grade of "Fail."

American Lung Association in New Hampshire

www.lung.org/newhampshire

AT-RISK GROUPS

County	Total Population	Under 18	65 & Over	Lung Diseases			Cardio-vascular Disease	Diabetes	Poverty
				Pediatric Asthma	Adult Asthma	COPD			
Berknap	60,177	11,831	11,444	1,753	5,767	7,791	4,749	4,577	10,213
Cheshire	76,710	14,478	12,715	1,532	6,804	4,438	4,934	5,711	8,214
Cook	31,997	5,665	6,970	598	2,875	2,029	2,525	2,743	4,576
Grafton	89,624	15,569	15,601	1,648	5,117	5,795	5,822	6,815	9,168
Hillsborough	473,965	89,301	74,023	9,465	24,507	21,782	23,256	27,614	36,817
Merrimack	135,842	25,323	22,547	3,150	12,020	8,395	7,196	10,790	12,155
Rockingham	229,134	53,166	41,694	6,496	25,858	17,080	18,506	21,515	17,563
Totals	1,108,383	229,906	167,369	24,342	96,253	62,750	68,488	80,442	94,566

HIGH OZONE DAYS 2011-2013

County	Orange	Red	Purple	Wgt. Avg.	Grade
Belknap	0	0	0	0.0	A
Chester	0	0	0	0.0	A
Cook	2	0	0	0.7	B
Crafts	3	0	0	0.7	A
Hillsborough	4	0	0	1.0	C
Merrimack	0	0	0	0.0	A
Rockingham	5	0	0	1.7	C

HIGH PARTICLE POLLUTION DAYS 2011-2013

24 Hour					Annual	
Orange	Red	Purple	Wgt. Avg.	Grade	Design Value	Pass/Fail
0	0	0	0.0	A	5.0	PASS
2	0	0	2.7	D	7.0	PASS
DNC	DNC	DNC	DNC	DNC	DNC	DNC
0	0	0	0.0	A	6.5	PASS
0	0	0	0.0	A	7.7	PASS
0	0	0	0.0	A	8.2	PASS
0	0	0	0.0	A	INC	NC

ASTHMA'S IMPACT ON THE NATION



New Hampshire

Asthma is **common**.



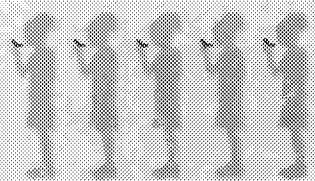
1 in 11 children have asthma

1 in 12
adults have asthma

Black children are
2 TIMES
more likely to have asthma
than white children.

In 2013
1 in 9
NH children
and adults
had asthma!

Asthma is **deadly**.



1 in 5 children with asthma
went to an emergency department
for asthma-related care in 2009.

In 2009, there were

479,000
asthma-related
hospitalizations

1.9 MILLION
asthma-related
emergency
department visits

8.9 MILLION
asthma-related
doctor visits

About
6000
Emergency Department
visits are due to
asthma
each year for
NH residents


9 people **die** from asthma every day.

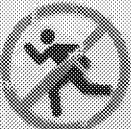


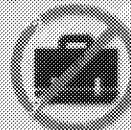
Black Americans are **2-3** times more likely to die from asthma than any other racial or ethnic group.

34% of NH children & **43%** of NH adults reported having "poorly controlled" or "not well controlled" asthma

Asthma is disruptive.


NEARLY
1 in 2
children with asthma report missing at least 1 day of school each year because of asthma.

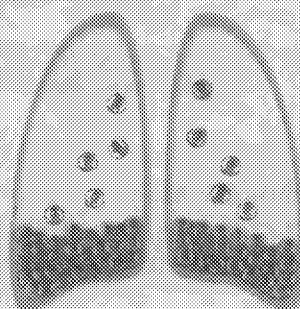

3 in 5
People with asthma limit their physical activity


NEARLY
1 in 3
adults with asthma report missing at least 1 day of work each year because of asthma.

\$21 million = cost of lost wages **due to asthma care** in *NH* annually

Asthma is expensive.

Asthma costs **OUR NATION**
\$56 BILLION per year



1 in 4
black adults can't afford their asthma medicines.



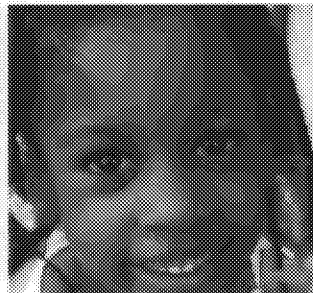
1 in 5
Hispanic adults can't afford their asthma medicines

In NH direct medical costs associated with asthma are **\$167 million** annually



MOMS *clean air* FORCE

FIGHTING FOR
OUR KIDS' HEALTH



We are a community of parents fighting air pollution to protect the health of our children.

WHY MOMS SHOULD CARE ABOUT TOXIC AIR

The Clean Air Act has never been fully implemented. America's kids face grave threats from toxic chemicals in the air.

- Arsenic, chromium, and nickel cause cancer; lead damages the nervous system; acid gases irritate the nose and throat; dioxins affect the reproductive, endocrine, and immune systems; volatile organic compounds weaken lungs and eyes.
- American coal plants produce 360,000 tons of hazardous air pollutants every year, at a time when nine million U.S. children under 18 have been diagnosed with asthma. Asthma is the number one reason kids miss school. Asthma attacks are triggered by air pollution.
- Coal-fired plants are the primary source of toxic air emissions in the United States, responsible for almost 3/4 of mercury air emissions.
- Mercury is a potent neurotoxin that harms the developing brains, lungs, and hearts of fetuses and young children. Over 400,000 newborns in the United States are exposed to mercury levels that can damage brain development, cause learning disabilities, result in language disorders and memory problems, and impair vision and hearing.

MOTHERHOOD IS POWERFUL

You cannot buy clean air. You can fight for it—through our political process. Join your voice with thousands of other moms to protect our right to clean air.

It is time to tell Washington: Listen to your mothers!

Together, we can make a difference.

PLEASE JOIN US

1

SIGN UP at our website
www.momscleanairforce.org
to keep informed.

2

TAKE ACTION—sign our petition to
support strong mercury rules.

3

ASK FRIENDS TO JOIN.

4

LIKE US ON FACEBOOK,
FOLLOW US ON TWITTER
(@CleanAirMoms)

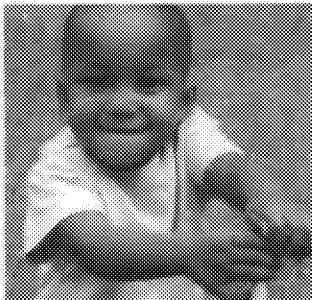


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MOMS *clean air* FORCE

FIGHTING FOR
OUR KIDS' HEALTH



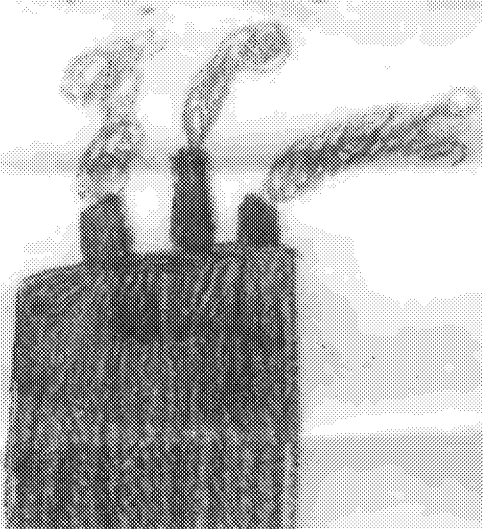
We are a community of parents fighting air pollution to protect the health of our children.

NAPTIVE ACTIVISM

- We use powerful social media tools to reach thousands of parents about the dangers of air pollution.
- We inspire political activism in support of the bipartisan Clean Air Act.
- Moms are busy! We love Naptime Activism. We make it easy and fast to make our voices heard, together.
- Visit our website for lots of resources—as well as petitions to sign.



Stop Pollution!



WHY IS CLEAN AIR CONTROVERSIAL?

Pre-polluters, working on behalf of the coal and fossil fuel industries, are spending millions of dollars lobbying Congress to dismantle the Clean Air Act—even though polls show that Americans want clean air.

- Polluters want to block new Mercury and Air Toxics Standards and cripple the EPA's authority to continue to keep our air and water clean.
- Polluters are calling to abolish the EPA and repeal the Clean Air Act, one of the most successful environmental protections in the world, signed into law in 1970 by Republican President Richard Nixon.
- Polluters claim—falsely—that cleaning the air means losing jobs and soaring electric rates.

www.momscleanairforce.org